

Type a plus sign (+) inside this box [+]

Approved for use through 9/30/00

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01 (8/96)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Attorney Docket Number</td> <td>4913-00001</td> </tr> <tr> <td>First Named Inventor</td> <td>Mark E. Riesterer</td> </tr> <tr> <td colspan="2" style="text-align: center;">COMPLETE IF KNOWN</td> </tr> <tr> <td>Application Number</td> <td></td> </tr> <tr> <td>Filing Date</td> <td></td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>	Attorney Docket Number	4913-00001	First Named Inventor	Mark E. Riesterer	COMPLETE IF KNOWN		Application Number		Filing Date		Group Art Unit		Examiner Name	
Attorney Docket Number	4913-00001														
First Named Inventor	Mark E. Riesterer														
COMPLETE IF KNOWN															
Application Number															
Filing Date															
Group Art Unit															
Examiner Name															
DECLARATION															
Declaration <input checked="" type="checkbox"/> Submitted with Initial Filing OR Declaration <input type="checkbox"/> Submitted after Initial Filing															
As a below named inventor, I hereby declare that:															
My residence, post office address, and citizenship are as stated below next to my name.															
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:															
<div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> DENESTING APPARATUS </div> (Title of the Invention)															
the specification of which <input checked="" type="checkbox"/> is attached hereto															
OR															
<input type="checkbox"/> was filed on (MM/DD/YYYY) <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> as United States Application Number or PCT															
International Number (if applicable) <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> and was amended on (MM/DD/YYYY) <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>															
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.															
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.															
I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.															
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached? YES NO											
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>										
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:															
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.															
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional Application numbers are listed on a supplemental priority sheet attached hereto.													

Type a plus sign (+) inside this box [+]

DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 (c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Daniel D. Fetterley	20,323	Joseph D. Kuborn	40,689
George H. Solveson	25,927	William L. Falk	27,709
Gary A. Essmann	29,376	Jeffrey S. Sokol	35,686
Thomas M. Wozny	28,922	Peter T. Holsen	P54,180
Michael E. Taken	28,120		
Joseph J. Jochman	25,058		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

☒ Please direct all correspondence to: Name Joseph J. Jochman

Address Andrus, Scales, Starke & Sawall, LLP

Address 100 East Wisconsin Avenue, Suite 1100

City Milwaukee State Wisconsin Zip 53202-4178

Country United States Telephone (414) 271-7590 Fax (414) 271-5770

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Mark E.	Riesterer

Inventor's Signature  Date 7-1-03 7-1-03


RESIDENCE: City Valders State WI Country U.S.A. Citizenship U.S.

POST OFFICE ADDRESS 20316 County Hwy C

City Valders State WI Zip 54245 Country U.S.A.

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.

Please type a plus sign (+) inside this box [+]

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Kurt M.				Evenson			
Inventor's Signature				Date	07/01/2003		
RESIDENCE: City	Cato	State	WI	Country	U.S.A.	Citizenship	U.S>
POST OFFICE ADDRESS		305 South Hwy. J					
City	Cato	State	WI	Zip	54230	Country	U.S.A.